



CITY OF CHICAGO



DEPARTMENT OF HOUSING

November 1, 2021

RE: EMERGENCY HEATING REPAIR PROGRAM

Dear Applicant(s),

Thank you for your interest in the Chicago Department of Housing (DOH) Emergency Heating Repair Program (EHRP). This is a one-time service grant that will provide furnace or boiler repair service or replacement to a single-family, one- to four-unit, owner-occupied residential property located in the city of Chicago.

The enclosed package includes the following informational documents:

- Program Summary Sheet (2-pages)
- Frequently Asked Questions and Answers Sheet (3-pages)

Application forms:

- Application (5-pages)
- Tenant Certification Form (2-pages)
- Documentation Checklist (2-pages)

The completed application and all supporting documents (see attached checklist) that applies to your household must be submitted during the open enrollment period of November 1, 2021, through April 1, 2022.

NOTE: Funding is limited and available on a first-come-first-service basis. Please return the completed application with all supporting documents to our office as soon as possible for processing and funding reservation.

The completed application packages can be submitted by one of the following methods:

- Mail: City of Chicago-Department of Housing -Attn: Emergency Heating Repair Program, 121 N. LaSalle St, Chicago, IL 60602, 10th floor, Rm 1000
- Email: ehrp@cityofchicago.org. Subject line: EHRP application (documents must be scanned. Photo documents not acceptable)
- Drop-off at: City Hall, 121 N LaSalle St, Chicago, IL 60602, 10th floor; Room 1000
- Fax: (312) 742-0264: Attn: Emergency Heating Repair Program (EHRP)

If you have any questions or need assistance with your application, please contact one of the DOH's program staff members: Regina Gibson at (312) 744-0070, Jequetta Vaughn (312) 744-5409 or Cindy Patino (312) 744-1819 (Spanish-language).

Sincerely,

Judith S. Pernell, Program Director
Chicago Department of Housing

EMERGENCY HEATING REPAIR PROGRAM (EHRP)

Program Summary

Services

The Chicago Department of Housing (DOH) Emergency Heating Repair Program (EHRP) provides a grant up to \$24,999 to low-moderate income, owner-occupied residential building of one to four (1-4) units. The program is limited to the repair/replacement service of a heating system. Remedies commensurate to the level of damage determined by the DOH Rehab Construction division upon inspection (*assistance limited to funding availability*). Grant funds are limited and provided on a first-come, first-serve basis to income qualified Chicago residential property owners. **Eligible residential buildings will be assisted one time for one-service (furnace or boiler) only and for the life of the property.** In two to four (2-4) unit residential buildings with individual heating systems only the owner-occupied unit will qualify for assistance.

Applicant(s) Income Requirements

Total household members gross income earnings (including rental income, earning for minors and any other source of income) that totals 80% or less of the area median income (AMI) are eligible to participate in the program (see household gross income limits).

NOTE: The Tenant Income Certification form must be completed by tenant(s) only if the repair/replaced heating unit provides service for the entire multi-family building. For property that is jointly owned, the total gross income of all owners shall be included with other household member(s) income and may not exceed 80% of AMI.

Applicant(s) Property Requirements

- Applicant(s) must be on deed title for at least one (1) year starting from the date of application
- The eligible owner-occupied property must be located in Chicago
- Property must be in habitable condition
- Property must be a one to four (1-4) unit building
- Property cannot be at risk of foreclosure
- All utilities must be current and in working order
- Work to be performed cannot not exceed program limit

If the owner sells, transfers title, or no longer occupies the property within one year of the grant service, the owner will be required to pay back a prorated amount of the funds.

A property that received assistance in the past under the program is ineligible to participate again.

NOTE: Commercial and mixed-use properties (apartment plus business or commercial units) do not qualify for program.

How to Apply

Interested homeowner(s) can download an application package starting November 1st through April 1st at: www.chicago.gov/ehrp.

Funding is limited and available on a first-come-first-service basis. The completed and signed application along with all required documents that relate to your household must be returned to the DOH as soon as possible. A document checklist is provided for your convenience with the application. Any application packet missing the required documents, will be considered incomplete and not processed until all required documents are received. A written notification letter will be mailed requesting for the missing documents that must be returned to the office by the included deadline date. When all documents are received the application will be processed for a status.

2021 Household Gross Income Limits

2021 MAXIMUM GROSS (Before Deductions) INCOME LIMITS

Household Size	Max Income 80% AMI
1	\$52,200
2	\$59,650
3	\$67,100
4	\$74,550
5	\$80,550
6	\$86,550
7	\$92,450
8	\$98,450

**Income limits are based on the Chicago-Naperville-Joliet, IL HUD Metro FMR Area (HMFA).
Effective until superseded**

EMERGENCY HEATING REPAIR PROGRAM (EHRP) FREQUENTLY ASKED QUESTIONS (FAQs)

1. What type of residential properties qualifies for the EHR program?
✓ **ANSWER:** A Chicago owner occupied residential property that has one to four residential units. (Commercial, mixed-use (store-front and residential) and 5+ condo buildings are not eligible).
2. If I own a Chicago residential property and it is not my primary residency, can I participate in the program?
✓ **ANSWER:** No. Only the owner-occupied residential properties with 1 to 4 units can participate.
3. What is the Income Qualification?
✓ **ANSWER:** The total gross household income cannot exceed HUD's 80% AMI (Area Median Income) requirement. An income summary sheet is included as part of the application for your convenience.
4. Does all household members' income need to be included to qualification process?
✓ **ANSWER:** Yes. Every household member that receives income would need to provide their gross income to determine the total household gross income.
5. What does the gross income mean?
✓ **ANSWER:** The amount of income you receive **before any deductions** for taxes, healthcare, etc.,) have been taken out of the earnings.
6. Do I need to have homeowners' insurance to qualify for the program?
✓ **ANSWER:** Yes. As a requirement of the program the property must have adequate insurance liability coverage.
7. If I received EHRP service in a previous year under the EHR program, can I apply again?
✓ **ANSWER:** No. The program is available for one service (furnace or boiler), one (1) time for the life of the property.
8. If I bought my Chicago home under one (1) year ago, could I apply?
✓ **ANSWER:** No. You must own and reside on the property for one or more years before completing an application.
9. If my furnace/boiler is not working in the cold weather, how can I get emergency help under the program?
✓ **ANSWER:** You can call the City's 311 or DOH customer service line at (312) 744-3653 or visit www.chicago.gov/ehrp and download an application to start the process. Applications can be picked up or dropped off between 9am to 4pm at Chicago Department of Housing, City Hall, 10th floor, Rm 1000, 121 N. LaSalle Chicago, IL. 60602. If you need emergency heating service Monday through Friday after 4pm, or on weekends, please call the City's 311 service line with your request. DOH will reply within two (2) business days. 311 can also direct you to a nearby

warming center.

10. Do I need to be present when an inspector comes out to my home for a site inspection?
- ✓ **ANSWER:** Yes. The preference is that the owner is present between the hours of 7:30am and 3pm Monday through Friday.
11. How long will it take for me to get a status on my application after I submit it?
- ✓ **ANSWER:** The initial process starts when the loan officer has received all the required documents. After all documents have been received from applicant, it may take two to seven business day for a status. Afterwards, a status letter will be mailed and a DOH inspector will contact you to schedule a site visit if approved.
12. If I own a multi-family property (2-4 units) that has a separate heating system for the rental unit(s), can the rental heating unit(s) or boiler(s) be repaired under the program?
- ✓ **ANSWER:** No. Repairs are provided to owner-occupied unit only. However, if the central heating unit services the entire building, then the additional rental unit(s) will benefit from the repair/replacement to the heating system also.
13. What are the next steps after I have been determined income eligible?
- ✓ **ANSWER:** Your income eligibility application will be sent to DOH construction team. They will contact you by phone or an email to schedule and set-up a site inspection appointment. Also, a reservation letter will be mailed to your home by DOH's loan processor.
14. After the site inspection has been completed, how long will it take for my furnace or boiler to be repaired?
- ✓ **ANSWER:** Repairs are performed on a first-come/first-served basis. Scheduling is controlled by the contractor. After DPD site inspection is completed, homeowner can directly contact contractor for status of their work/repair. Contractor information will be located on your written reservation letter.
15. Can I get the repairs done by a contractor of my choice and have the City of Chicago reimburse me for the cost?
- ✓ **ANSWER:** No. DOH has contracted with vendors (contractors) who have met the City of Chicago's vendor requirement through the City's procurement process. They will be the assigned contractor for the work.
16. Who should I call if I have questions regarding my application status or documents?
- ✓ **ANSWER:** You can speak to a program officer: Regina Gibson (312) 744-0070, Jequetta Vaughn (312) 744-5409 or Cindy Patino at (312) 744-1819 (Spanish-language).
17. Who should I call if I have problems with the repairs after the work has been completed?
- ✓ **ANSWER:** For any service-related issues, the homeowner should contact the assigned contractor directly. The contract's information can be found on the contracted documents that you will receive when the work is completed.

18. Is there a warranty on the work completed by the contractor under the program?

✓ **ANSWER:** Yes. There is a one-year warranty on the work starting from the Quality Control inspection date.

19. Will I ever have to pay back the grant funds?

✓ **ANSWER:** Typically, no. If the owner sells, transfer the title, or no longer occupies the unit within one (1) year from the date of the grant then the funds will have to be paid back on a prorated basis.

EMERGENCY HEATING REPAIR PROGRAM (EHRP)

Application Form

Enrollment Period: November 1, 2021 – April 1, 2022

Date: _____

I. Personal Information (questions marked with an * must be complete)											
*1) Applicant's Name					*2) Home Address						
					Apt #		Zip Code				
*3) Last four (4) digits of Social Security XXX-XX-		*5) Marital Status Check One		*6) Sex Check One		7a) Race		*8) Applicant Status Check One			
		Single						9a) Home Phone #			
		Married		Male		7b) Ethnicity		Veteran			
4) Date of Birth (MM/DD/YYYY)		Divorced		Female				Disabled		9b) Cell #	
		Widowed						Senior (62 years or older)			
		Separated						9c) Email Address			
10) Employer Name					11) Employer Address						
12) Business Phone		13) Job Title			14) Length of Employment		15) Name & Address of Previous Employer (if less than 2 years at current job)				
					# of Years						
					# of Months						
16) Co-applicant Name					17) Home Address (if different)						
					Apt #		Zip code				
18) Last four (4) digits of Social Security XXX-XX-		20) Marital Status Check One		21) Sex Check One		22a) Race		23) Applicant Status Check One		24a) Home Phone #	
		Single						Veteran		24b) Cell #	
		Married		Male				Disabled			
19) Date of Birth (MM/DD/YYYY)		Divorced		Female		22b) Ethnicity		Senior (62 years or older)		24c) Email Address	
		Widowed									
		Separated									
25) Employer Name					26) Employer Address						
27) Business Phone		28) Job Title			29) Length of Employment		30) Name & Address of Previous Employer (if less than 2 yrs. at current job)				
					# of Years						
					# of Months						

II. Property Information

31) Is this a multi-unit building?		Yes	If yes, how many units are occupied?		How many units are vacant?	
		No				
32a) Is this building a Townhouse?		Yes	32b) Is this building a Condo?			Yes
		No				No
33) Year Purchased			34) Refinanced		Yes	34a) Year Refinanced
					No	
35) Structure Type Check One		Brick	36) Service being Requested Check One			Furnace
		Frame				
		Stucco				
		Other				Boiler

III. Household Information *ALL HOUSHOLD MEMBERS MUST BE LISTED BELOW*

37) List the names of all household members (required) <i>Provide any additional members on a separate page</i>	38) Age (Required)	39) Relationship	40) Monthly Gross Income**	41) Source of Income**
		Owner (Applicant)		
		Co-Owner (Co-Applicant)		
42(a) Total number of household members				
42b) Are any of the household members children under the age of 7? <small>*Note: Application must include all household members and if 18 yrs. or older must include a valid photo identification* (must provide age above)</small>				
43) Total Monthly Gross Income of all Household Members				
Applicant(s) must provide a valid source of income to participate in program				

IV. HOUSING EXPENSES

Expense Type	44) Monthly Payment	45) Past Due* (If applicable)	DOH Staff Only (Do not use)
a) First Mortgage			
b) Second Mortgage			
c) Homeowner's Insurance			
d) Real Estate Taxes			
e) Heat (Gas)			
f) Electric			
g) Water			
h) Maintenance Costs (if more than one unit)			
Total Housing Expenses			

*Please indicate if you have a payment plan or have a mortgage loan

V. Property Mortgage Information

46) Please indicate name on mortgage account if different than owner's					
47) Name of Mortgage Lender/Mortgagee					48) Monthly Payment
First Mortgage Lender (if applicable)					\$
Second Mortgage Lender (if applicable)					\$
49) Do you have a Reverse Mortgage?		Yes	50) Are you currently receiving monthly payments from the Reverse Mortgage?		Yes
		No	If yes, please indicate the monthly amount		No
51) Do you have any other liens on your property?		Yes	If yes, please list the type of lien.		
		No			

VI. Type of Assistance Requested

52) Type of Repair			Previous HEATING Assistance of the EMERGENCY HEATING REPAIR(s)	
<u>SELECT ONLY ONE</u> Please select one and mark with an "X"			Have you ever applied for the Emergency Heating Repair program before?	Yes
Furnace System	<input type="checkbox"/> Repair <input type="checkbox"/> Replace	No		
Boiler System	Repair		If so, When?	
	Replace		What work was completed?	

Additional Comments

REPRESENTATIONS AND WARRANTIES

The information contained within this statement is in support of an application for assistance from the Chicago Department of Housing (DOH). Each of the undersigned acknowledge and understand that DOH is relying on the information provided herein in deciding to award assistance in the form of a loan or grant. Each of the undersigned represents warrants and certifies that the information provided herein on financial condition and household size is true, correct and complete. Each of the undersigned agrees to notify DOH immediately and in writing of any change in name, address employment and of any material adverse change

(1) in any of the information contained in the statement,

(2) in the financial condition of any of the undersigned or, (3) in the ability of the undersigned to perform its (their) obligations to you. In the absence of such written notice, this should be considered as a continuing statement and substantially correct. Each of the undersigned hereby authorizes DOH to make all inquiries it deems necessary to verify the accuracy of the information contained within and to determine the creditworthiness of each of the undersigned. Each of the undersigned authorizes any person or consumer crediting reporting agency to give the city information it may have regarding each of the undersigned. Each of the undersigned authorizes DOH to answer questions about its credit experience with the undersigned. If any obligation or guarantee of the undersigned to DOH is outstanding, the undersigned may be asked to supply an updated financial statement. The personal financial statement and any other financial or other information that the undersigned gives and shall be the City's property to be released as DOH deems fit.

Application Certification

I have received a copy of the Program summary sheet and supporting documents outlining the **Emergency Heating Repair (EHR) Program**. Please note: The completion of an application is not a guarantee of service. **The Department of Housing (DOH)** reserves the right to cancel this application when deemed necessary.

53a) Applicant Signature (required)

Date

53b) Co-applicant Signature (required – If applicable)

Date

54) Please answer the following two questions. This information is being compiled for statistical purposes only and will not be used to make funding or eligibility decisions. Please check the following which most describes you:

<input type="checkbox"/>	White
<input type="checkbox"/>	Black/African American
<input type="checkbox"/>	Asian
<input type="checkbox"/>	Native Hawaiian/Other Pacific Islander
<input type="checkbox"/>	American Indian/Alaskan Native Black/African American & White American Indian/Alaskan Native & White
<input type="checkbox"/>	American Indian/Alaskan Native and Black/African American
<input type="checkbox"/>	Asian and White
<input type="checkbox"/>	Other/Multiracial
<input type="checkbox"/>	I choose not to answer this question
<input type="checkbox"/>	I am of Hispanic Origin
<input type="checkbox"/>	I am not of Hispanic Origin
<input type="checkbox"/>	I choose not to answer this question

EMERGENCY HEATING REPAIR PROGRAM (EHRP)

Tenant Self Certification of Annual Income Form

Date: _____

Landlord Name(s): _____

Property Address: _____

Number of building units: _____

Chicago, Illinois 606_____

Tenant unit number/floor: _____

INSTRUCTIONS: The two (2) page certification form must be completed by tenant(s) only when the repair/replacement of the boiler or heating system services and heats the entire residential building. Please complete each section below:

1. Primary Tenant(s) Household Information- <i>*All household members information must be Provided below:</i>					
Full Names of all household members required: <i>(if additional members please provide a separate page)</i>	Age*	Relationship to Head of household Tenant	Disable Person (Yes or No)	Annual Gross Income*	Source of Income* <i>(All sources, i.e., wages, social security, Pension, etc.)</i>
		Head of Household Tenant			
		Co-Head of Household Tenant			
Are any household members listed above under the age of seven (7)?	Yes: __ No: __ __				

2. Total number of Household Members: _____

3. Total Annual Gross Income: _____

4. Contact Information:

Phone number(s):	Address(es):	City/State:
1.		
2.		

WARNING: The information provided on this form is subject to verification by HUD at any time, and Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony and assistance can be terminated for knowingly and willingly making a false or fraudulent statement to a department of the United States Government.

Date: _____

Landlord Name(s): _____

Property Address: _____

Chicago, Illinois 606_____

5. Certification of Information:

I/we certify that this information is complete and accurate. I/we agree to provide if requested, any/all income documents to the Housing and Urban Development (HUD) Grantee/Program Administrator.

Signature (Head of Household):	Print Name:	Date:
Signature (Co-Head of Household):	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:
Household Member (18 yrs. or older)	Print Name:	Date:

Household Size	2021 50% Area Median Income limit	2021 60% Area Median Income limit	2021 65% Area Median Income limit	2021 80% Area Median Income Limit
1 person	\$32,650	\$39,180	\$42,445	\$52,200
2 persons	\$37,300	\$44,760	\$48,490	\$59,650
3 persons	\$41,950	\$50,340	\$54,535	\$67,100
4 persons	\$46,600	\$55,920	\$60,580	\$74,550
5 persons	\$50,350	\$60,420	\$65,455	\$80,550
6 persons	\$54,100	\$64,920	\$70,330	\$86,500
7 persons	\$57,800	\$69,360	\$75,140	\$92,450
8 persons	\$61,550	\$73,860	\$80,015	\$98,450
9 persons	\$65,250	\$78,300	\$84,825	\$104,370
10 persons	\$69,000	\$82,800	\$89,700	\$110,334

***Please attach another copy of this page if additional signature lines are required.**

Emergency Heating Repair Program (EHRP)

Document Checklist

Applicant Name

Date

The following required documents that apply to your household, must be included when returning your completed and signed application. Please mark an “X” by document included in your application packet.

<input type="checkbox"/>	Copy of current Property Deed (must be recorded with Cook County Recorder of Deeds Office)
<input type="checkbox"/>	Copy of current mortgage Statement, reverse mortgage statement, OR lender mortgage modification agreement (past due statements are not accepted)
<input type="checkbox"/>	Copy of current Cook County Real Estate Tax Bill
<input type="checkbox"/>	Copy of current Homeowner’s Insurance Declaration page or policy (expired statements not acceptable)
<input type="checkbox"/>	Copy of signed 2019 and 2020 Federal Tax Returns including all schedule exhibits and addendums (must be signed and dated)
<input type="checkbox"/>	Copy of all 2020- and 2019-years employer W2s and any 1099 forms
<input type="checkbox"/>	Copies of all income documentation from each household member (see below income documents)
<input type="checkbox"/>	Copy of the three most-recent paycheck stubs
<input type="checkbox"/>	Copy of current year Social Security Statement or award letter
<input type="checkbox"/>	Copy of current year Disability statement or award letter
<input type="checkbox"/>	Copy of current pension and annuity statements
<input type="checkbox"/>	Copy of current Dividends and capital Gains Statements
<input type="checkbox"/>	Copy of current Unemployment Benefit Statement (online printouts not acceptable)
<input type="checkbox"/>	Copy of DHS Public Cash Assistance Letter (excluding SNAP/Link benefits)
<input type="checkbox"/>	Copy of current lease or three (3) current rent receipts from all tenants (in 2–4-unit buildings)
<input type="checkbox"/>	Tenant certification form (if applicable) (Note: tenant to complete, sign, and date)
<input type="checkbox"/>	Copy of current profit and loss statement if Self-employed (must be signed and notarized)
<input type="checkbox"/>	Copy of school records and/or transcripts (if any household member is currently enrolled)
<input type="checkbox"/>	Copy of current Gas bill (payment plan letter must be included if applicable)
<input type="checkbox"/>	Copy of current Electric Bill (payment plan letter must be included if applicable)
<input type="checkbox"/>	Copy of current Water Bill (payment plan letter must be included if applicable)
<input type="checkbox"/>	Copy of death certificate (if applicable)
<input type="checkbox"/>	Copy of Divorce Decree or Legal Separation agreement (if applicable)
<input type="checkbox"/>	Copy of State Identification or Driver’s License on all adults in household 18 years or older, and all co-owners
<input type="checkbox"/>	Copy of State ID or Driver’s License of co-owner not residing in the property
<input type="checkbox"/>	Copy of Social Security Cards on all household members, minor children, and co-owners) not living on the property
<input type="checkbox"/>	Copy of current Building Code violations (if applicable)
<input type="checkbox"/>	Notarized Letter of Explanation regarding

NOTE: Funding is available on a first-come-first-service basis. Please return the completed and signed application *with all required* documents that relate to your household as soon as possible. A document checklist is provided for your convenience with the application. Application packets missing any required documents, will be considered incomplete and not processed until all documents are received. A written notification will be mailed requesting for the missing documents that must be returned to the office by the included deadline date. When all documents are received the application will be processed for a status.

DUE TO THE COVID-19 PANDEMIC, COMPLETED APPLICATION PACKAGE CAN BE RETURNED BY ONE (1) OF THE FOLLOWING WAYS:

- **Mail:** Chicago Department of Housing (DOH) City Hall, 121 N. LaSalle, 10th flr., Rm 1000, Chicago, IL 60602. Attn: Emergency Heating Repair Program
- **Email:** ehrp@cityofchicago.org **In Subject Line:** EHRP application
- **Drop-off:** Chicago Department of Housing (DOH) - City Hall 121 N LaSalle, 10th flr., Rm. 1000 Chicago, IL. 60602
- **Fax:** (312) 742-0264: **Attn: Emergency Heating Repair Program (EHRP)**

If you have any questions, please contact one of the following loan officers Regina Gibson at (312) 744-0070, Jequetta Vaughn at (312) 744-5409 or Cindy Patino at (312) 744-1819 (Spanish-language)